

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-29163 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1520

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Lease Name or Unit Agreement Name BRIDGES STATE
2. Name of Operator Mobil Producing Tx. & N.M. Inc.*	8. Well No. 196
3. Address of Operator *Mobil Exploration & Producing U.S. Inc., as Agent for Mobil Producing TX. & N.M. Inc., P. O. Box 633, Midland, TX 79702	9. Pool name or Wildcat VACUUM GRAYBURG SAN ANDRES
4. Well Location Unit Letter C : 1188 Feet From The NORTH Line and 1357 Feet From The WEST Line Section 24 Township 17S Range 34E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Pressure test for TA <input checked="" type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

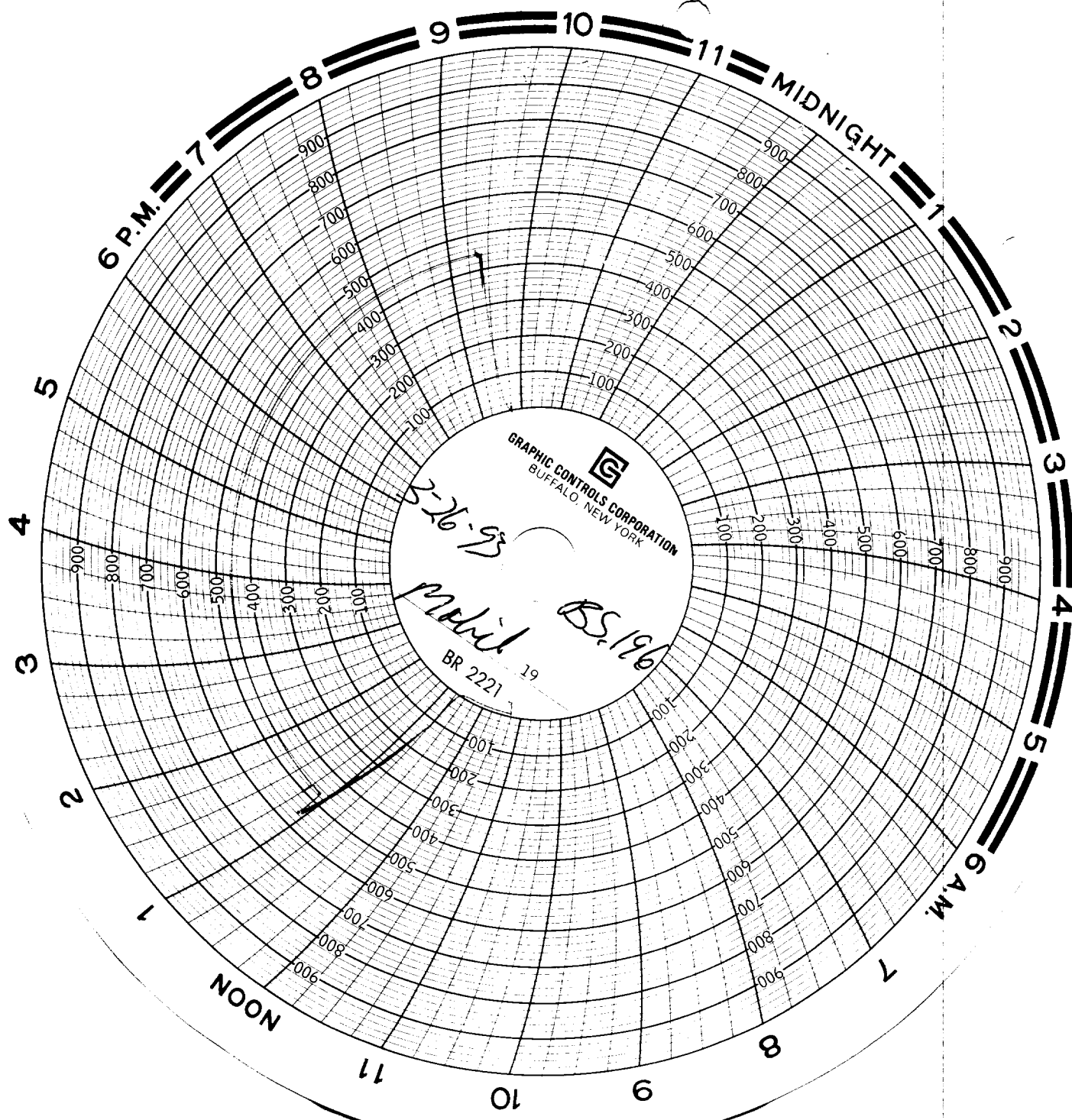
THIS WELL WAS SHUT IN ON 12-09-88. MPTM IS REQUESTING EXTENTION OF TA'D STATUS.  
A PRESSURE TEST WAS CONDUCTED ON 03-26-93. THE CHART IS ATTACHED.

This Approval of Temporary  
Abandonment Expires 5-1-98

I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE <i>Kaye Pollock</i>	TITLE ENV. & REG. TECHNICIAN	DATE 04-19-93	
TYPE OR PRINT NAME KAYE POLLOCK		(915)	
		TELEPHONE NO. 688-2584	

(This space for State Use)

APPROVED BY <i>[Signature]</i>	TITLE	DATE APR 21 1993
CONDITIONS OF APPROVAL, IF ANY:		



**RECEIVED**  
APR 20 1993  
OCD HOBBS OFFICE